

General

Title

Hypertension diagnosis and treatment: percentage of adult patients age greater than or equal to 18 years diagnosed with hypertension who are not at goal for hypertension and have received counseling on diet and physical activity in the past 12 months.

Source(s)

Institute for Clinical Systems Improvement (ICSI). Quality improvement support: hypertension diagnosis and treatment. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014. 9 p.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage adult patients age greater than or equal to 18 years diagnosed with hypertension who are not at goal for hypertension and have received counseling on diet and physical activity in the past 12 months.

Rationale

The priority aim addressed by this measure is to increase the percentage of patients with hypertension age greater than or equal to 18 years who receive counseling on diet and physical activity.

Eighth Joint National Committee (JNC 8) in support of American College of Cardiology (ACC)/American Heart Association (AHA) Healthy Lifestyle Recommendations Diet Blood Pressure (BP): Advise adults who would benefit from BP lowering (1) is fully endorsed by the Institute for Clinical Systems Improvement

(ICSI) Hypertension Diagnosis and Treatment Work Group:

"Consume a dietary pattern that emphasizes intake of vegetables, fruits, and whole grains; includes low-fat dairy products, poultry, fish, legumes, non-tropical vegetable oils, and nuts; and limits intake of sweets, sugar-sweetened beverages, and red meats.

Adapt this dietary pattern to appropriate calorie requirements, personal and cultural food preferences, and nutrition therapy for other medical conditions (including diabetes).

Achieve this pattern by following plans such as the Dietary Approaches to Stop Hypertension (DASH) dietary pattern, the U.S. Department of Agriculture (USDA) Food Pattern, or the AHA Diet"

(James et al., 2014).

JNC 8 in support of ACC/AHA Healthy Lifestyle Recommendations Diet BP: Advise adults who would benefit from BP lowering (2) is fully endorsed by the ICSI Hypertension Diagnosis and Treatment Work Group:

"Lower sodium intake. (1)

Consume no more than 2,400 mg of sodium/d (2)

Further reduction of sodium intake to 1500 mg/d can result in even greater reduction in BP (2)

Even without achieving these goals, reducing sodium intake by at least 1000 mg/d lowers BP (2)"

(James et al., 2014).

JNC 8 in support of ACC/AHA Healthy Lifestyle Recommendations Diet BP (2 and 3 combined) is fully endorsed by the ICSI Hypertension Diagnosis and Treatment Work Group:

"Combine the DASH dietary pattern with lower sodium intake" (James et al., 2014).

JNC 8 in support of ACC/AHA Healthy Lifestyle Recommendation Physical Activity BP (1) is fully endorsed by the ICSI Hypertension Diagnosis and Treatment Work Group:

"In general, advise adults to engage in aerobic physical activity to lower BP: 3 to 4 sessions per week, lasting on average 40 minutes per session, and involving moderate to vigorous intensity physical activity" (James et al., 2014).

Evidence for Rationale

Institute for Clinical Systems Improvement (ICSI). Hypertension diagnosis and treatment. Recommendation table. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014. 8 p.

Institute for Clinical Systems Improvement (ICSI). Quality improvement support: hypertension diagnosis and treatment. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014. 9 p.

James PA, Oparil S, Carter BL, Cushman WC, Dennison-Himmelfarb C, Handler J, Lackland DT, LeFevre ML, MacKenzie TD, Ogedegbe O, Smith SC Jr, Svetkey LP, Taler SJ, Townsend RR, Wright JT Jr, Narva AS, Ortiz E. 2014 evidence-based guideline for the management of high blood pressure in adults: report from the panel members appointed to the Eighth Joint National Committee (JNC 8). JAMA. 2014 Feb 5;311(5):507-20. [45 references] [PubMed](#)

Primary Health Components

Hypertension; lifestyle counseling; diet; physical activity

Denominator Description

Number of adult patients age greater than or equal to 18 years diagnosed with hypertension and are not at treatment goal

Numerator Description

Number of adult patients age greater than or equal to 18 years who receive counseling on diet and physical activity in the past 12 months

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

Unspecified

National Guideline Clearinghouse Link

2014 evidence-based guideline for the management of high blood pressure in adults. Report from the panel members appointed to the Eighth Joint National Committee (JNC 8).

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory/Office-based Care

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Clinical Practice or Public Health Sites

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Age greater than or equal to 18 years

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

Case Finding Period

The time frame pertaining to data collection is quarterly.

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Patient/Individual (Consumer) Characteristic

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

Number of adult patients age greater than or equal to 18 years diagnosed with hypertension and are not at treatment goal

Exclusions

Unspecified

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of adult patients age greater than or equal to 18 years who receive counseling on diet and physical activity in the past 12 months

Exclusions

Unspecified

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

Percentage of adult patients age ≥ 18 years diagnosed with hypertension who are not at goal for hypertension and have received counseling on diet and physical activity in the past 12 months.

Measure Collection Name

Hypertension Diagnosis and Treatment

Submitter

Institute for Clinical Systems Improvement - Nonprofit Organization

Developer

Institute for Clinical Systems Improvement - Nonprofit Organization

Funding Source(s)

The Institute for Clinical Systems Improvement's (ICSI's) work is funded by the annual dues of the member medical groups and five sponsoring health plans in Minnesota and Wisconsin.

Composition of the Group that Developed the Measure

Work Group Members: Tony Woolley, MD (*Work Group Leader*); Ian Kenning, MD; Henry Maranga Kerandi, MD; David Luehr, MD; Karen Margolis, MD, MPH; Patrick J. O'Connor, MD, MA, MPH; Chrystian R. Pereira, PharmD; Allyson M. Schlichte, PharmD, MBA, BCACP

Financial Disclosures/Other Potential Conflicts of Interest

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Where there are work group members with identified potential conflicts, these are disclosed and discussed at the initial work group meeting. These members are expected to recuse themselves from related discussions or authorship of related recommendations, as directed by the Conflict of Interest committee or requested by the work group.

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Disclosure of Potential Conflicts of Interest

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National, Regional, Local Committee Affiliations: None

Guideline Related Activities: None

Research Grants: None

Financial/Non-Financial Conflicts of Interest: Consulting: None

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Financial/Non-Financial Conflicts of Interest: None

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Guideline Related Activities: WHI work groups and US Preventive Services Task Force systematic review group relevant to hypertension

Research Grants: Receives programmatic support for NIH funded trials and NIH consulting

Financial/Non-Financial Conflicts of Interest: None

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Guideline Related Activities: ADA GL 2011-2012, ICSI guidelines: Diagnosis and Management of Type 2 Diabetes Mellitus in Adults, Lipid Management in Adults

Research Grants: Receives programmatic support for NIH funded trials and NIH consulting

Financial/Non-Financial Conflicts of Interest: Grants/Pending Grants; Patents, Royalties, or any Compensation for Intellectual Review, NIH

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Guideline Related Activities: None

Research Grants: None

Financial/Non-Financial Conflicts of Interest: None

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2014 Nov

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in January 2016.

Measure Availability

Source available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#)

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NQMC Status

This NQMC summary was completed by ECRI Institute on May 15, 2015.

The information was reaffirmed by the measure developer on January 13, 2016.

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Production

Source(s)

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